



**CODE COMPLIANCE CERTIFICATE  
APPLICATION FOR A  
SOLID / LIQUID FUEL HEATER  
(FORM 6-H)**

**PROJECT NO:** \_\_\_\_\_

**APPLICATION**

|  |  |
|--|--|
| Site Address: _____<br>_____ Street/Road   | Type of Building Work: _____<br>(eg. Domestic Dwelling)                            |
| Legal Description: _____   | Project Information Memorandum No: _____   |
| (This could include all or any of the following – Lot, DP, Section, Block, or Township, etc) | Building Consent No: _____   |
| Valuation Roll Number: _____   | Building Consent Issued by: _____<br>_____<br>(Name of Building Consent Authority) |

| THE OWNER   | AGENT – APPLICANT   |
|---|---|
| Owner's Name:   | Agent's Name:   |
| Contact Person:<br><small>(if owner is not an individual)</small> | Contact Person:   |
| Mailing Address:  | Mailing/Billing Address:  |
|   |   |
| Postcode:   | Postcode:   |
| Street Address/Registered Office                                  | Street Address/Registered Office  |
|   |   |
| Mobile Phone:   | Mobile Phone:   |
| Phone:  | Phone:  |
| Fax Number:   | Fax Number:   |
| E-mail Address:   | E-mail Address:   |
| Code Compliance Certificate to be posted to:<br>_____<br>_____    | Note - The Agent will be the first point of contact for communications with the Council/Building Consent Authority regarding this application / Building Work and will receive all correspondence including all invoices. |

| KEY PERSONNEL                      |                      | Certificate Attached |
|------------------------------------|----------------------|----------------------|
| Name of <b>Designer</b> :          | Phone Number:        |                      |
| Mailing Address:                   | Registration Number: |                      |
| E-mail Address:                    |                      |                      |
| Name of <b>Engineer</b> :          | Phone Number:        |                      |
| Mailing Address:                   | Registration Number: |                      |
| E-mail Address:                    |                      |                      |
| Name of <b>Builder</b> :           | Phone Number:        |                      |
| Mailing Address:                   | Registration Number: |                      |
| E-mail Address:                    |                      |                      |
| Name of <b>Craftsman Plumber</b> : | Phone Number:        |                      |
| Mailing Address:                   | Registration Number: |                      |
| E-mail Address:                    |                      |                      |

|   |                      |  |
|---|----------------------|--|
| Name of <b>Registered Drainlayer</b> :  | Phone Number:        |  |
| Mailing Address:                        | Registration Number: |  |
| E-mail Address:                         |                      |  |
| Name of <b>Registered Electrician</b> : | Phone Number:        |  |
| Mailing Address:                        | Registration Number: |  |
| E-mail Address:                         |                      |  |
| Name of <b>Registered Gasfitter</b> :   | Phone Number:        |  |
| Mailing Address:                        | Registration Number: |  |
| E-mail Address:                         |                      |  |

Add any additional people on another sheet.

| <b>SIGNATURE</b>   |                                |
|--|--------------------------------|
| <input type="checkbox"/> I request that you issue a Code Compliance Certificate for this work under Section 95 of the Building Act 2004.                         |                                |
| Signed by or for and on behalf of the Owner: _____   |                                |
| <input type="checkbox"/> Owner   | <input type="checkbox"/> Agent |
| Date: _____  |                                |
| Note: If acting "for and on behalf", please read the following declaration before signing: "I hereby declare that I am authorised to act as Agent of the Owner". |                                |

| <b>COMPLIANCE CHECK LIST FOR THE INSTALLATION OF A: (MUST BE COMPLETED)</b> |   |                    |                          |                            |                          |                          |                          |
|---|---|--------------------|--------------------------|----------------------------|--------------------------|--------------------------|--------------------------|
| SOLID FUEL HEATER   | <input type="checkbox"/>  | LIQUID FUEL HEATER | <input type="checkbox"/> | FREE STANDING              | <input type="checkbox"/> | INBUILT                  | <input type="checkbox"/> |
| Make:   |   | Model:             |                          | Registration No.           |                          |                          |                          |
|   |   |                    |                          | <b>Tick as Appropriate</b> | <b>Yes</b>               | <b>No</b>                | <b>N/A</b>               |
| ▪   | The existing chimney has been cleaned prior to installation.  |                    |                          |                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ▪   | Is the fireplace surround/chimney face junction sealed up with heat resistant material                                |                    |                          |                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ▪   | The flue pipe is constructed of austenitic stainless steel.   |                    |                          |                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ▪   | Seismic restraint has been fitted.  |                    |                          |                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ▪   | The flue sections are secured together with stainless steel rivets.   |                    |                          |                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ▪   | The flue is secured to the appliance.   |                    |                          |                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ▪   | The chimney void has been vented at the top.  |                    |                          |                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ▪   | Flue and appliance clearances have been achieved in terms of the manufacturer's instructions. NZS 7421 or AS/NZS 2918 |                    |                          |                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

|  |                          |                          |                          |
|--|--------------------------|--------------------------|--------------------------|
| ▪ The flue height meets the minimum specified in the manufacturer's instructions, NZS7421, and Regional Council rules.   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ▪ The appliance has been installed and commissioned in accordance with the manufacturer's installation and operating instructions. (Liquid fuel only).                               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ▪ The liquid fuel storage tank and feed system has been installed in accordance with AS1691, or equivalent, and with the requirements of the Council's Hazardous Substances Officer. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ▪ Smoke detectors as detailed on the building consent documents are installed.   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ▪ If response to any of the items is 'no' please comment: _____<br>_____   |                          |                          |                          |
| Water heater – model and part number   |                          |                          |                          |

I \_\_\_\_\_ **(print name)** certify that the above specified installation has been carried out as described and in accordance with the manufacturers installation instructions and the current approved building code requirements.

Installers Signature: \_\_\_\_\_ Date \_\_\_\_\_  
(Installer)

**RESOURCE MANAGEMENT ACT MATTERS – LIQUID FUEL HEATER**

**Yes No**

- Does the fuel storage tank have secondary containment in accordance with the District Plan (NB: Audit monitoring will be carried out).
- If response is "no" please comment why:  
\_\_\_\_\_

**Additional Information to Note**

1. A final inspection must have been completed prior to this application being sought.
2. The Code Compliance Certificate will be based on the approved building consent documents, so any variations to the original approved plans are required to be documented & approved prior to the work being carried out.
3. A Code Compliance Certificate will not be issued until all of the information required on this form that is relevant to the job is provided to the Council. This includes all Names, Certificates from personnel who carried out the work, Registration Numbers, Producer Statements, or any other required documents.
4. Certificates that relate to energy work (Electrical & Gasfitters).
5. The specified systems are listed on the attached form are to be contained in the compliance schedule for the building. In the opinion of the personnel who installed them, they are capable of performing to the performance standards set out in the building consent.

**Notes by applicant:** (Other notes or comments which you as the applicant may wish to add)

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